

IN THE UNITED STATES DISTRICT COURT  
FOR THE MIDDLE DISTRICT OF TENNESSEE

**COMPLAINT FOR VIOLATION OF CIVIL RIGHTS**  
**UNDER TITLE 42 U.S.C., SECTION 1983**

LaQuenza M. Lilly ]

Prison Number 00275445 ]

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Prison Number \_\_\_\_\_ ] DEC 20 2010

U.S. DISTRICT COURT  
MID. DIST. TENN.

Prison Number \_\_\_\_\_ ]

Plaintiff(s) \_\_\_\_\_ ]

(List the Names of all plaintiffs Filing  
this Lawsuit; do not use "ET AL") \_\_\_\_\_ ]

Civil Action No. \_\_\_\_\_ ]

(To be assigned by the Clerk's Office.)  
(Do not write in this blank space) \_\_\_\_\_ ]

vs. \_\_\_\_\_ ]

Tennessee Department Of Correction \_\_\_\_\_ ]

Cathy McCarson \_\_\_\_\_ ]

David Jenkins \_\_\_\_\_ ]

Defendant(s) \_\_\_\_\_ ]

(List the names of all defendants against  
whom you are filing this lawsuit; do not  
use "ET AL") \_\_\_\_\_ ]

**If you need more space to list other plaintiffs and/or defendants, so indicate  
and attach a separate of paper.**

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LaQuenza M. Lilly ]  
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Plaintiff(s) \_\_\_\_\_ ]  
(List the Names of all plaintiffs Filing  
this Lawsuit; do not use "ET AL") ]  
vs. \_\_\_\_\_ ]  
Jamie Walter ]  
Jeremy Rubert ]  
\_\_\_\_\_  
Defendant(s) \_\_\_\_\_ ]  
(List the names of all defendants against  
whom you are filing this lawsuit; do not  
use "ET AL") ]

Civil Action No. \_\_\_\_\_  
(To be assigned by the Clerk's Office.)  
(Do not write in this blank space)

If you need more space to list other plaintiffs and/or defendants, so indicate  
and attach a separate of paper.

(Continuation Sheet) of 1

I. PREVIOUS LAWSUITS:

A. Have you or any of the other plaintiffs listed above filed any other lawsuits in a United States District Court (Tennessee) and/or in any other state or federal court?

Yes  No

B. If your answer YES to Question A, list the following information:

(If you have filed more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline as below).

1. Parties to previous lawsuit:

Plaintiffs: N/A

Defendants: N/A

2. In what court did you file the previous lawsuit?

N/A  
( If Federal Court, name the district; if State Court, name the county)

3. Case Number of previous lawsuit: N/A

4. Name of Judge to whom case was assigned: N/A

5. When did you file the previous lawsuit N/A  
(Indicate year if you don't know the exact month or day)

6. What was the disposition or result of the previous lawsuit (For example, was it dismissed, appealed, or is it still pending?)

N/A

7. When was the previous lawsuit decided by the Court? (Indicate the year if you do know exact month or day)

N/A

8. Did the previous lawsuit involve the same facts or circumstances that you are alleging in the lawsuit you are now submitting?

Yes  No

II. PLACE OF CURRENT CONFINEMENT OF PLAINTIFF(S):

A. Name of prison or jail, in which you are currently incarcerated:

Turney Center Industrial Complex

B. Are the facts of your lawsuit related to your confinement in your present prison or jail?

Yes No

C. If your answer is No to question B, list the name and address of the jail or prison to which the facts of your lawsuit relate:

N/A

D. Do the facts of your lawsuit relate to your confinement in a Tennessee State prison?

Yes No

E. If your answer YES to Question D, did you present these facts to the prison authorities through the state prison grievance procedure?

Yes No

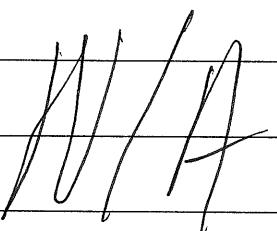
F. If you answered YES to Question E.

1. What steps did you take? I wrote a grievance around 11/5/10 to the Grievance Board at T.C.I.X. Which I feel they tried to hide

or dispose, because they wont let me have a Hearing.  
or talk to me. Put in my Evidence where I tryed to a  
different Grievance.

2. What was the result? They sent it back 2 two time and still I  
haven't had a Grievance Hearing and today Date is 12/16/10

G. If you answered NO to Question E, Explain why not:



III. PARTIES TO THIS LAWSUIT:

1. Name of First Plaintiff: LaQuenza M. Lilly

Prison ID Number of first Plaintiff: 00275445

Address of First Plaintiff: T.C.I.Y 1499 A.W. Moore Mem Hwy

Only, TN 37140

(Include name of institution and mailing address)

2. Name of Second Plaintiff: N/A

Prison ID Number of Second Plaintiff: N/A

Address of Second Plaintiff: N/A

(Include name of institution and mailing address)

Naming of the defendant in his or her individual and/or official capacity

4. Name of Fourth Defendant: Jamie Walter

Place of Employment of Fourth Defendant: T.C.I.X 1499 R.W. Moore  
Mem Hwy Only, TN 37140

Address of Fourth Defendant:

Named in official capacity Yes  No

Named in individual Capacity Yes  No

5. Name of Fifth Defendant: Jeremy Hubert

Place of Employment of Fifth Defendant: T.C.I.X 1499 R.W. Moore  
Mem Hwy Only, TN 37140

Address of Fifth Defendant:

Named in official capacity Yes  No

Named in individual Capacity Yes  No

(Continuation Sheet) of 5

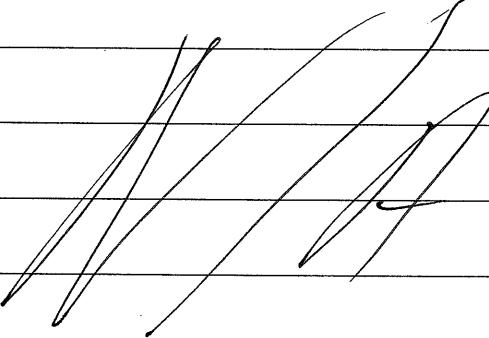
3. Name of Third Plaintiff: N/A

Prison ID Number of Third Plaintiff: N/A

Address of Third Plaintiff: N/A

(Include name of institution and mailing address)

If there are more than three Plaintiffs, list their names, prison identification numbers and addresses below or on an attached sheet of paper:



For each defendant, check weather you are naming the defendant in his or her individual and/or official capacity.

1. Name of First Defendant: Tennessee Department Of Correction

Place of Employment of First Defendant: State of Tennessee Department  
Of Correction

Address of First Defendant: S.O.T.D.O.C 4<sup>th</sup> Floor Rachel Jackson  
Bldg 320 Sirth Ave North Nashville TN 37243

Named in official capacity:  Yes No

Named in individual Capacity Yes No

2. Name of Second Defendant: Cathy McCarson

Place of Employment of Second Defendant: T.C.I.X 1499 R.W.

Moore Mem Hwy Only, TN 37140

Address of Second Defendant: \_\_\_\_\_

Named in official capacity:  Yes No

Named in individual Capacity Yes No

3. Name of Third Defendant: David Jenkins

Place of Employment of Third Defendant: \_\_\_\_\_ T.C.I.X 1499

R.W. Moore Mem Hwy Only, TN 37140

Address of Third Defendant: \_\_\_\_\_

Named in official capacity:  Yes No

Named in individual Capacity Yes No

**If you are bringing the lawsuit against more than three defendants, you must list each defendant's name, place of employment, address and capacity in which you are suing the defendant on an attached sheet of paper.**

**If you do not list each defendant's name, any such defendant will not be included in your lawsuit; if you do not list each defendant's name, place of employment and address, the clerk will not be able to serve any such defendant.**

#### IV. STATEMENT OF YOUR CLAIM:

State here as briefly as possible the facts of your case. Recite the dates when any incidents or events occurred, and the places where such incidents or events took place. Describe how each defendant is involved. Also include the names of other persons involved and the dates and places of their involvement.

If you set forth more than one claim, number each claim separately and set each claim forth in a separate paragraph.

On the Day of 11/1/10 I LaQuenza M. Lilly was healing from

a upper back injury. When T.C.I.Y prison clinic ran out of my Pain Medicine. So at the time I was on Segregation in my Cell. Where I cant come out unless they open my door.

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On the above Day and time 11/11/10 at 10:30am. My upper back was in Agonizing Pain. When I ask the Unit Officer Jemey Aubert to call the Clinic, and get me a nurse. Which know one came. It wasnt till 11:15 am tell the Nurse and Officer Cathry Macarson came around. It was at the time they bring Medicine everyday. I was able to get the Nurse to stop at my cell door.

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Thats when I told her I was in a lot of Pain and I needed something. When the Nurse stated: They are out of your Medicine. Then she lifted her shoulder like "Who Cares" then walked away. So the only thing I could do was "Beg", I scream Please get somebody if yall dont want to help! Which made others inmates state telling them they was wrong. They Steel Walk Out!

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So on the above Day and time 11/11/10 at 11:45 pm. They open my cell door, at T.C.I.Y Unit 5-D. So I was thinking I had to go to a D-Board Hearing to get off Segregation. So I tryed to start walking, but I only had enough energy to make it to the front door. When I fell down in Pain.

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Thats when I.R.C. Officer David Jenkins stated: Whats Wrong

with him. Then the Unit Officer <sup>C/O</sup> Jeremy Rubert stated: He been saying his back been hurting all day. Thats when I heard <sup>C/O</sup> Cathy McCarson Stated: "No! Thats the one who called me a Bitch". When I.R.C David Jenkins stated: "Yall Grab his arms and Legs."

Then I.R.C David Jenkins grab my Right Arm, Cathy McCarson grab my Right Leg, <sup>C/O</sup> Jamie Walter grab my Left Leg and <sup>C/O</sup> Jeremy Rubert grab my Left Arm.

As soon as I was Grabbed I had a shot of Pain. That ran Down my Lower back and Butt. Then up my left leg as they carried me to the cell. Then they through me on a Concrete floor

Then it was 20 to 30 minutes before <sup>the</sup> ~~Nurse Kevin Ross~~ came and put some I-Prim/Ibuprofen at my door. She <sup>never</sup> <sub>ask</sub> or check on me like she said in a Grievance I wrote on her. I was bent over when I grabbed them. Then I new something was wrong to the point. I cried!

So on the above Day and Time. 11/1/10 around 7:00 to 8:00 pm. I.R.C. David Jenkins and <sup>C/O</sup> Cathy McCarson realize they were in the wrong. So they both write me up not realizing they are

(Continuation Sheet) 87

telling on themselves. Which I will use for my Evidence in Court.

First: <sup>Co</sup> Cathy Mccarson write me up for Creating a Disturbance. Saying I called her a Bitch. Then she picked me up by putting her hands on me. It was clearly Retaliation.

Second: David Jenkins write me up for Refused Direct Order. How can I ~~Refuse~~ when I cant move in the first place.

In T.D.O.C Policy 113.31 1. State: Clinic Staffed twenty four hours. Medical Emergencies will be Evaluted at anytime. It also state: Only license PA., Nurse and Doctor's is to dill with inmates injury.

So on the above Day and time 11/11/10 at 11:45am. Officers Mr. Jenkins, Mrs Macarson, Walter and Mr Rubert should have called a "Code". So the Clinic could have sent somebody that's License.

It is stated in T.C.I.Y Inmate Handbook by Tennessee Department Of Correction. That the Tennessee Department Of Correction will insure. First: That Inmates have the right to Adequate Health Care. Second: There responsible to train and enforce all there employee's duties

So on the above Day and time 11/11/10 at 11:45am. My injury has "Worsen" from the handling of these four Officer. I cant stand for long period of time. I have Pain that shoot down my legs.

(Continuation Sheet) of 7

The pain now is a clear sign I wont be able to play sports anymore. Which has lead me into Depression. So on 11/10/10 I had to start taking Doxepin for it.

The Tennessee Department Of Correction need and should be held "Responsible". For all of there Employee's

If you require additional space, attach a separate sheet, or extra sheets, of paper.

V. RELIEF REQUESTED: List what you want the court to do; list the relief you seek against each defendant:

- A. Tennessee Department of Correction /I Request: 1.7 Million <sup>dollars</sup> and Court Cost
- B. Cathy McCarson /I Request: 201 Thousand <sup>dollars</sup> and Court Cost
- C. David Jenkins /I Request: 201 Thousand <sup>dollars</sup> and Court Cost
- D. Jamie Walter /I Request: 10 Thousand <sup>dollars</sup> and Court Cost
- E. ~~Jaomy~~ Hubert /I Request: 40 Thousand <sup>dollars</sup> and Court Cost

I (we) hereby certify under penalty of perjury that the above complaint is true to the best of my (our) information, knowledge, and belief.

Signed this 12 day of 15 , 2010

Signature: Jaomy Hubert

Prison ID Number 275445

Notice: All Plaintiffs must sign the Complaint. If there are more than three (3) plaintiffs, attach additions signatures, with prison identification no. and addresses

Signature: LaQuanga Yelby

Prison ID Number 2756145

Address: T.C.I.X 1499 R.W. Moore Mem Hwy Only, TN 37140  
night Change Prison Home address

(201 E Palestine Ave Apt E-24 Madison, TN 37115)

Signature: \_\_\_\_\_

Prison ID Number \_\_\_\_\_

Address: \_\_\_\_\_